

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04352

FILED  
Feb 14, 2008  
Secretary of State

Entity Name: CHRISTIAN TRAINING MINISTRIES, INC.

**Current Principal Place of Business:**

1747 HAWTHORNE DRIVE  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

3122 MANATEE DRIVE  
SEBRING, FL 338701580

**New Mailing Address:**

FEI Number: 59-2483802      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

DOWNING, LINDA M  
3122 MANATEE DRIVE  
SEBRING, FL 338701580 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DOWNING, LINDA M  
Address: 3122 MANATEE DRIVE  
City-St-Zip: SEBRING, FL 338701580

Title: VD ( ) Delete  
Name: DOWNING, CHESTER D  
Address: 3122 MANATEE DRIVE  
City-St-Zip: SEBRING, FL 338701580

Title: ST ( ) Delete  
Name: FLOYD, BARBARA  
Address: 10105 MUSTANG TRAIL  
City-St-Zip: SEBRING, FL 33872

Title: D ( ) Delete  
Name: DOWNING, CASEY L  
Address: 4308 RACHAEL DRIVE  
City-St-Zip: SEBRING, FL 33875

Title: D ( ) Delete  
Name: LUNDY, JAY  
Address: 319 ANDERSON STREET N. E.  
City-St-Zip: LAKE PLACID, FL 33852

Title: D ( ) Delete  
Name: LUNDY, JOAN  
Address: 319 ANDERSON STREET N. E.  
City-St-Zip: LAKE PLACID, FL 33825

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: FLOYD, BARBARA  
Address: 10105 MUSTANG TRAIL  
City-St-Zip: SEBRING, FL 33872

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: REEVES, DARLINE  
Address: 950 LAKE ANGELO DRIVE  
City-St-Zip: AVON PARK, FL 33825

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA M. DOWNING

PD

02/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date